## **DECLARATION AND POWER OF ATTORNEY** FOR PATENT APPLICATION

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As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Coder Matched Laver Separation And Interpolation For Compression Of Compound Document

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wheepecification of wh	ich is attach	ned hereto unless th	e following box is c	hecked:		
			cation No. or PCT Ir		olication	
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I here state that I he including the claims, a	s amended	by any amendment	(s) referred to above	e. I acknowle		
Foreign Application(s) and/or I hereby claim foreign priorit inventor(s) certificate listed is a filing date before that of the	y benefits undo below and have	er Title 35, United State e also identified below ar	ny foreign application for	any foreign applica patent or inventor	tion(s) for patent or (s) certificate having	
COUNTRY	APPLICATION NUMBER		DATE FILED	PRIORITY CLAIMED UNDER 35 U.S.C. 119		
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Provisional Application						
I hereby claim the benefit up below:	nder Title 35, l	Jnited States Code Sect	ion 119(e) of any United	d States provisiona	l application(s) listed	
	APPLI	CATION NUMBER	FILING DATE			
U. S. Priority Claim				İ		
insofar as the subject matte manner provided by the firs information as defined in Tit application and the national APPLICATION NUMBER	t paragraph of le 37, Code of or PCT internat	Title 35, United States Federal Regulations, Sec	Code Section 112, I ack tion 1.56(a) which occupplication:	nowledge the duty	to disclose materialiling date of the prio	
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POWER OF ATTORNEY: As a named inventor, I her business in the Patent and T  Customer	rademark Offic		and/or agent(s) to pros  Place Customer  Number Bar Code  Label here	secute this applica	tion and transact a	
Send Correspondence to	);		Direct Telepho	one Calls To:		
HEWLETT-PACKARD CO			Susan E. Hen	ninger		
P.O. Box 272400			(650) 236-2738			
Fort Collins, Colorado 8	0527-2400		(000, 200 2)			
I hereby declare that a made on information with the knowledge imprisonment, or both false statements may	and belief a that willful , under Sec	are believed to be t false statements ction 1001 of Title	true; and further the and the like so m 18 of the United St	at these staten nade are punis tates Code and	nents were mad hable by fine o that such willf	
Full Name of Inventor: <u>De</u>	bargha Muk	cherjee '	Citizenship: [[	V		
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Post Office Address: S	ame as Resi	dence	· · · · · · · · · · · · · · · · · · ·			
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Inventor's Signature

Date